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PTO/SB/01 (10-00)
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		Attorn y Dock t Number			
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			First Named Inventor	James E. Grove	
			COMPLETE IF KNOWN		
(37 CFR 1.63)		Application Number			
Declaration Submitted with Initial Filing		Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date		
	OR		Group Art Unit		
			Examiner Name		

As a below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
(Title of the Invention) the specification of which										
is attached hereto  OR as United States Application Number or PCT International										
was filed on (MM/DD/YYYY) (if applicable).										
Application Number and was amended on (MM/DD/YYYY)										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.										
Attached?										
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
ation										

[Page 1 of 2]
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## **DECLARATION** — Utility or Design Patent Application

Diffect all correspondence to:	Customer Nun				OR 🗓	Correspondence address below					
Name Jack C. Munro, Agent of Record											
Address 28720 Roadside Drive, Suite 225											
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Country US	7	elephone	, 818-9	991-16	87	Fax 818-889-0116					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
NAME OF SOLE OR FIRST INVENTOR:     A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])  Jame	s E.	Family Name Grove									
Inventor's Signature Date Au4 27,03											
Residence: City Marina del R	ey		State C	Α	Country US	Citizenship US					
Mailing Address 4316 Marina City Drive, #423CTN											
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city Marina del Rey	State Cal	iforni	a	ZIP 90	292	Country US					
NAME OF SECOND INVENTOR:      A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])					Family Name or Surname						
Inventor's Signature						Date					
Residence: City			State		Country	Citizenship					
Mailing Address											
Mailing Address											
City	State			ZIP		Country					
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.											